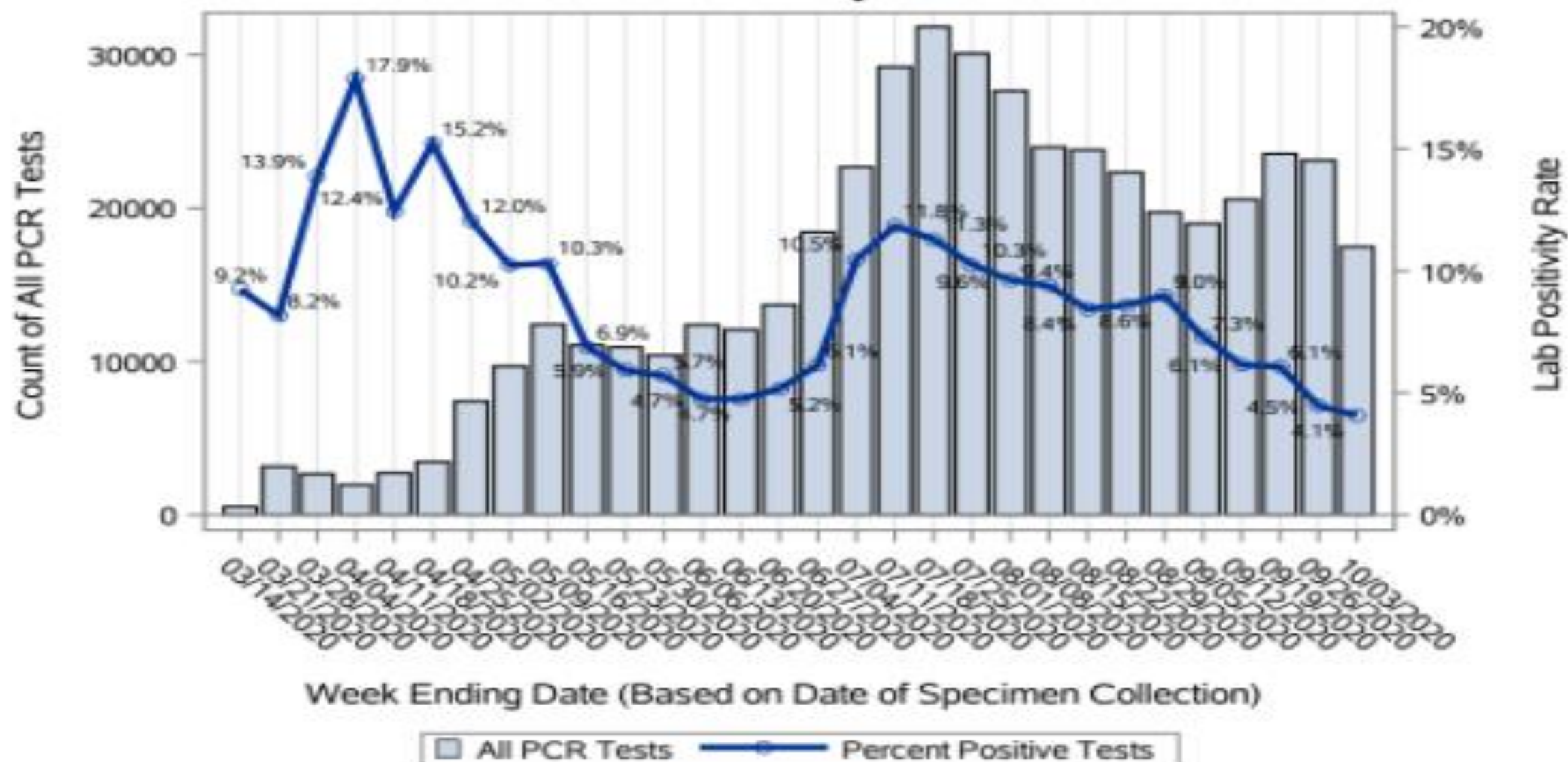


EASTERN REGION COVID-19 DATA

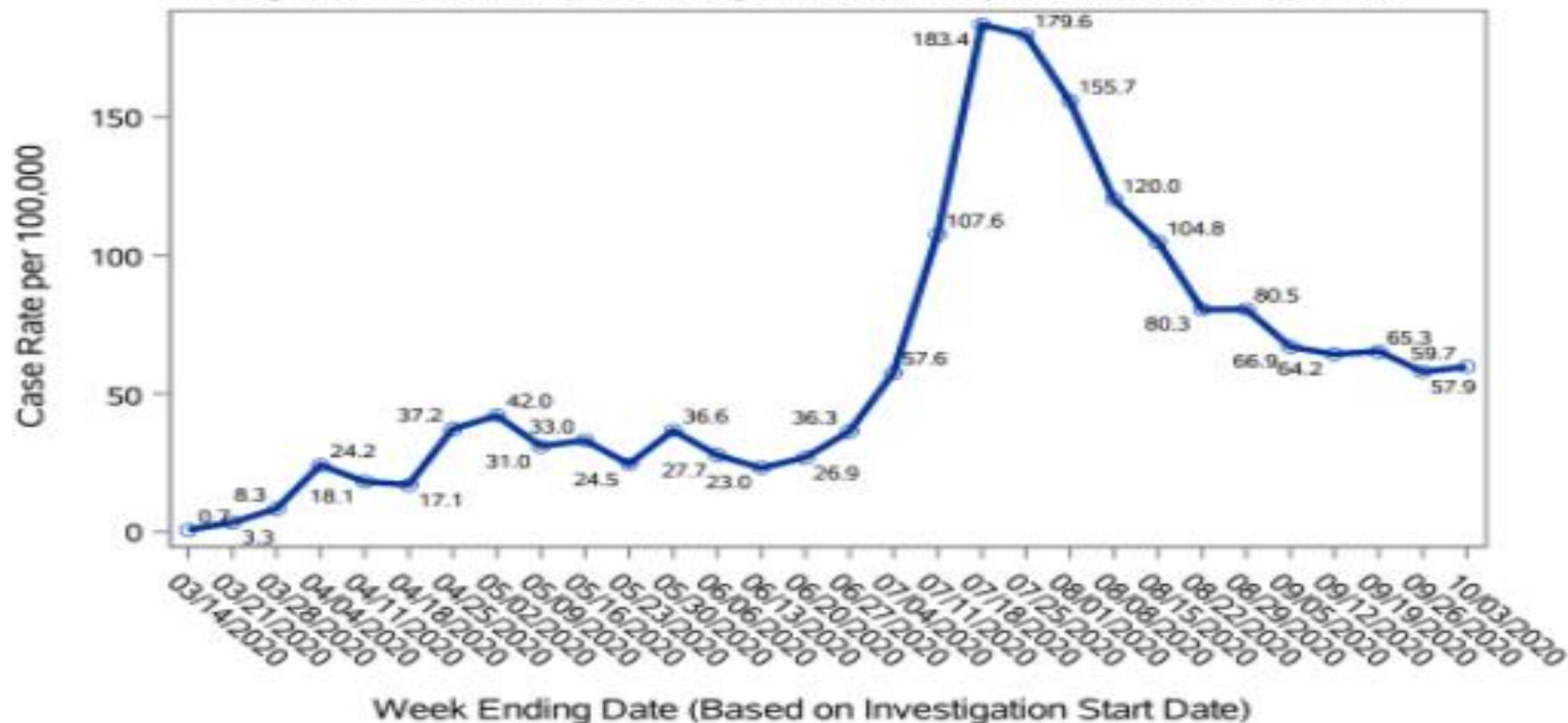
Eastern Region PCR Lab Tests and Positivity as of 04OCT2020



Represents all PCR laboratory results received as of 5pm 04OCT2020. Some lab reports may be duplicated.
NOTE: Weeks start on Sundays and end on Saturdays, so the current week's data are incomplete.

Eastern Region

Weekly COVID-19 Incidence Rate per 100,000 Population as of 04OCT2020

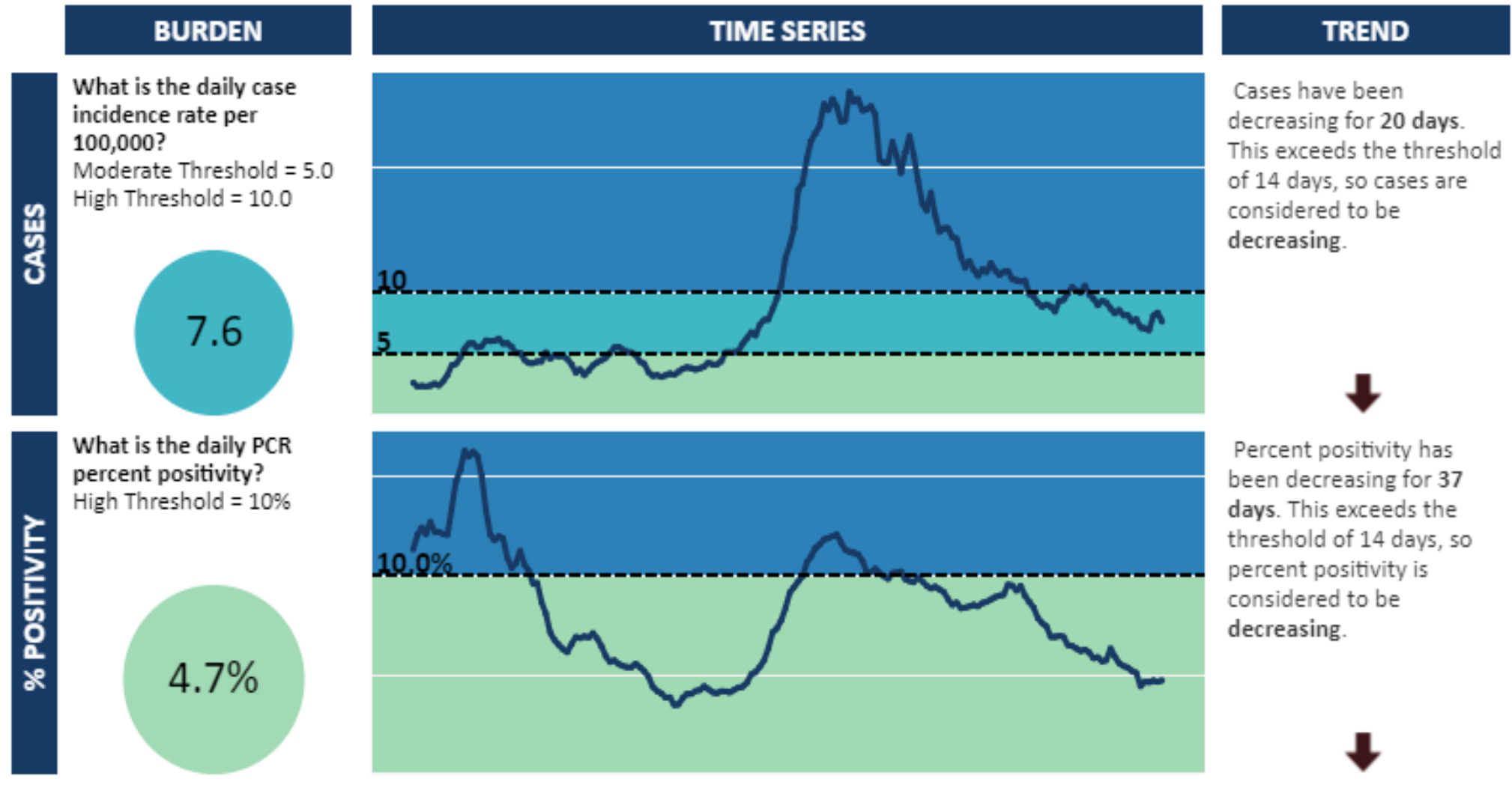


Represents case counts as of 5pm 04OCT2020. Includes only Confirmed or Probable cases with completed notifications.

Investigation start date is the date that the case was initiated for investigation by the local health department.

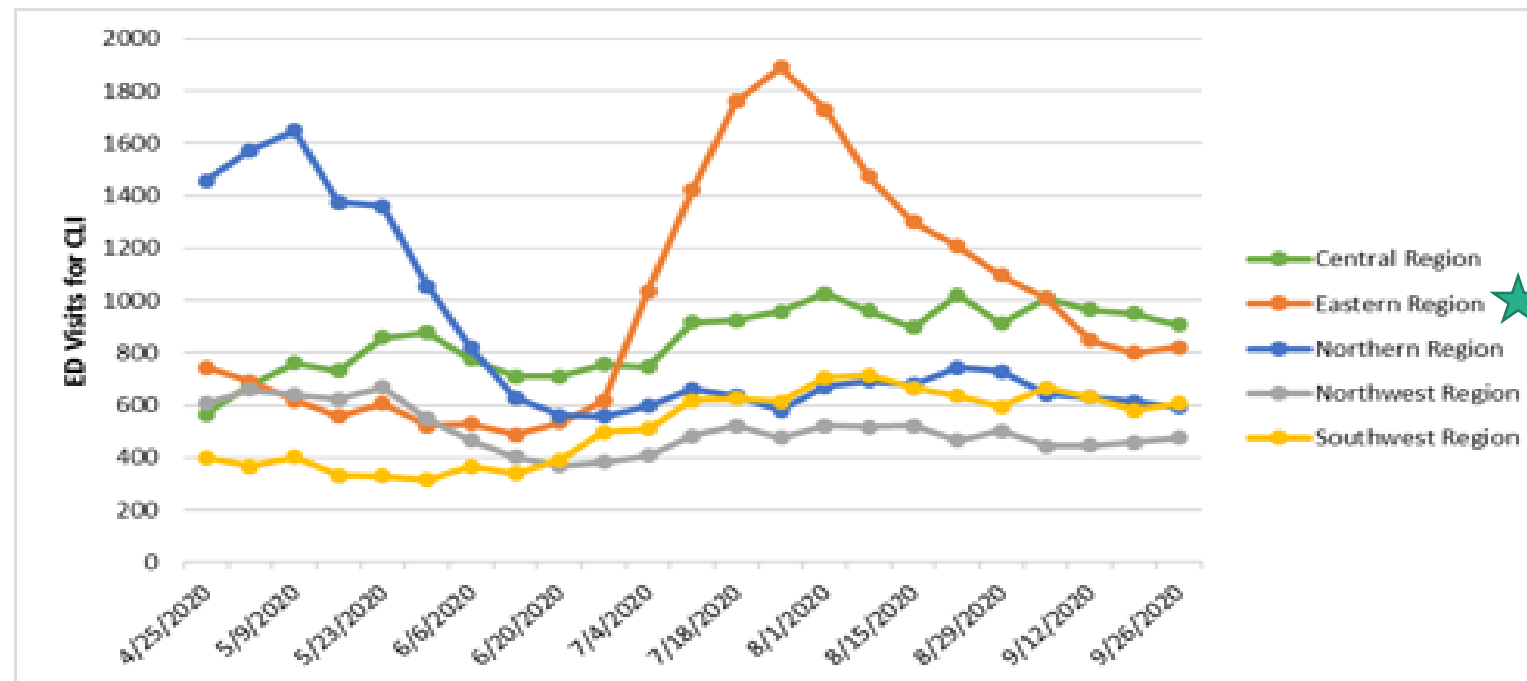
Eastern Region Daily Case Incidence Rate per 100,000 and Percent Positivity

Individual Metrics Burden and Trend, 10/6/2020



ESSENCE Surveillance Updates - Region

- ED visits for CLI:
 - Increasing: Eastern and Northwest (↑3% each), Southwest (↑4%)
 - Decreasing: Central (↓5%) and Northern (↓3%)



CHESAPEAKE COVID-19 DATA

COVID-19 Snapshot of Chesapeake

- (4,433) Confirmed Cases
- (76) Deaths
- (433) Hospitalizations
- (18) Outbreaks
- Number of Chesapeake Residents Tested: 60,874
- Positivity Rate: 5.3%
- Percent of Chesapeake Population Tested: 24.8%

Updated 06 Oct 2020 @ 2030 Hours

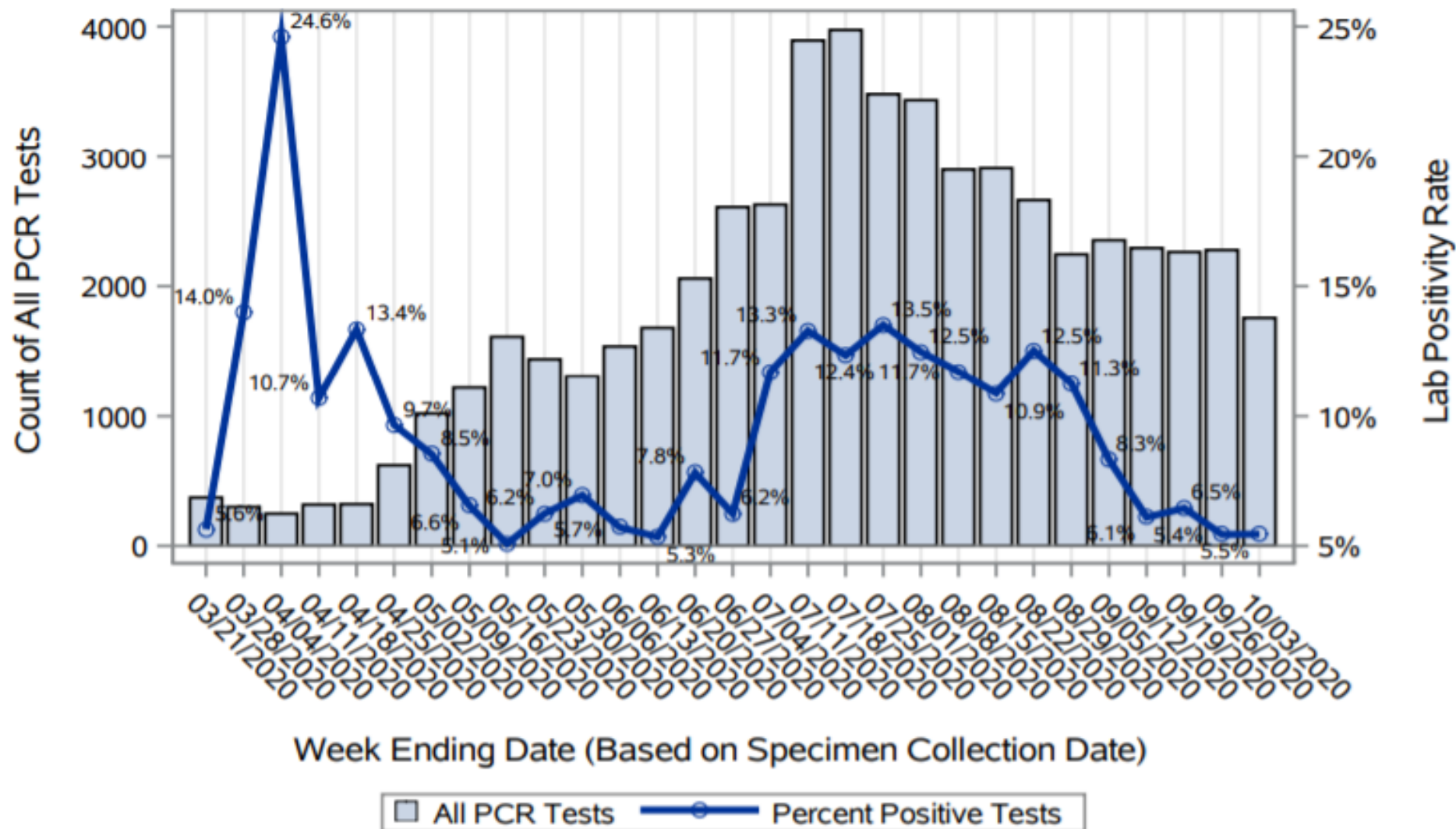
POSITIVITY: requires simultaneous reporting of positive & negative

$$\frac{\text{Hits} + \text{Doubles} + (2 \times \text{Triples}) + (3 \times \text{Home Runs})}{\text{AtBats}}$$



The Denominator is not consistent

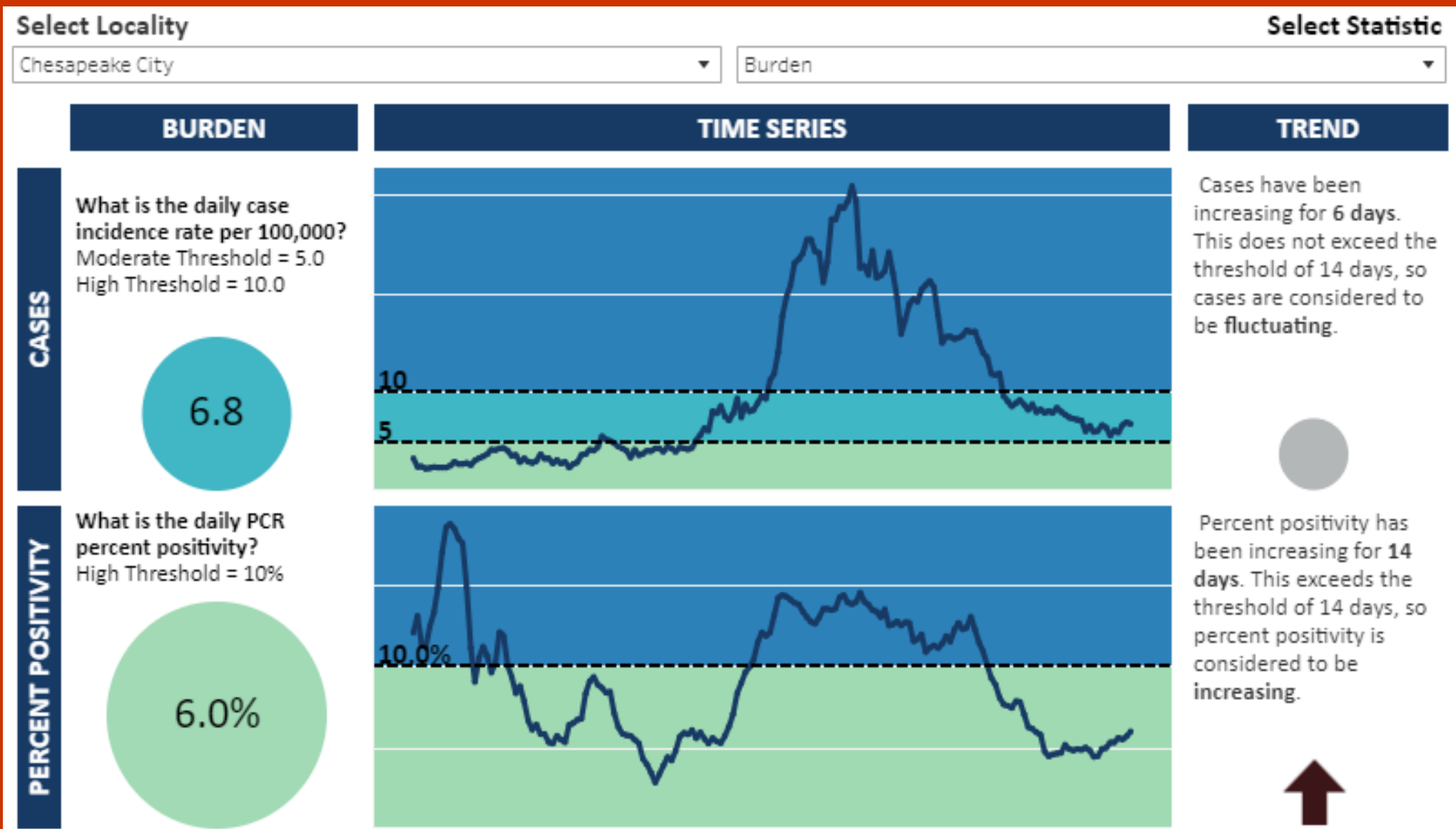
Chesapeake Health District Weekly PCR Lab Tests and Positivity as of 04OCT2020



Represents all PCR laboratory results received as of 5pm 04OCT2020. Test counts may not correspond to the actual count of cases (one person may have multiple positive tests).

NOTE: Weeks start on Sundays and end on Saturdays, so the current week's data are incomplete.

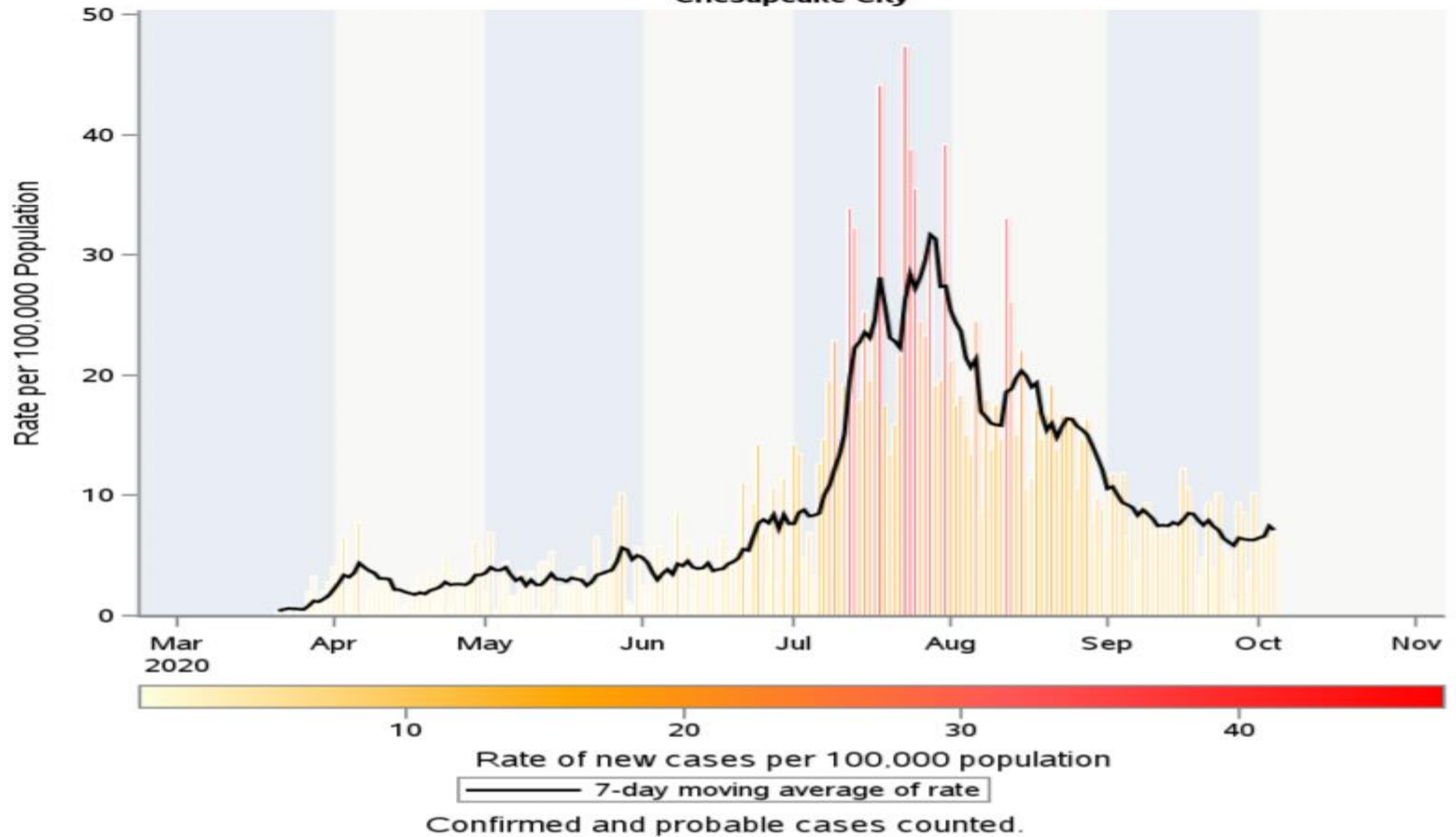
Chesapeake Daily Case Incidence Rate per 100,000 and Percent Positivity



Updated 10/6/2020

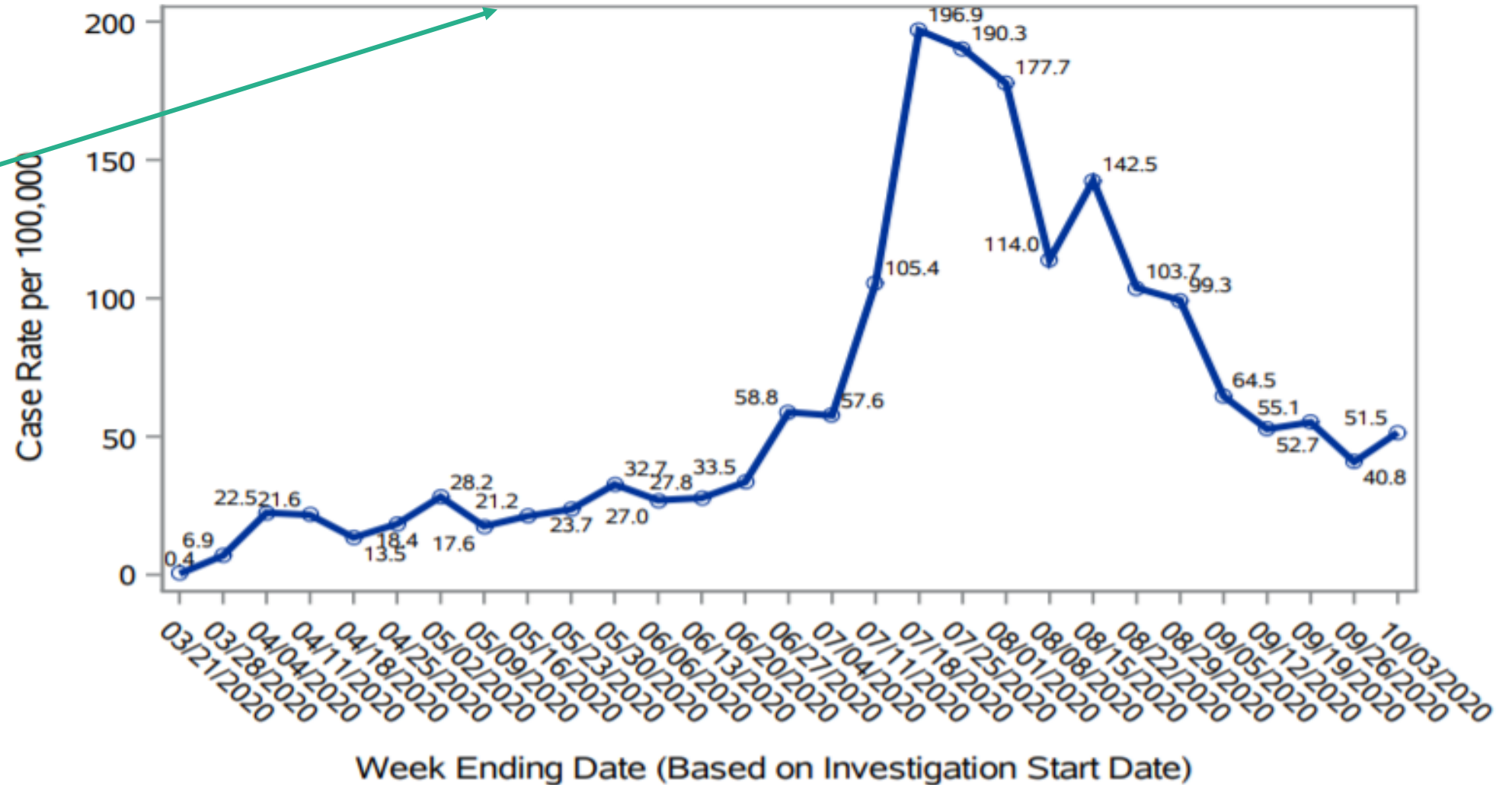
Covid-19 Rate by Day as of 04OCT2020

Chesapeake City



Only
requires
positive
#'s

Chesapeake Health District Weekly COVID-19 Incidence Rate per 100,000 Population as of 04OCT2020



Represents case counts as of 5pm 04OCT2020. Includes only Confirmed or Probable cases with completed notifications.
Investigation start date is the date that the case was initiated for investigation by the local health department.

Chesapeake School Metrics



Core Indicators, Chesapeake City, 10/6/2020

Total number of new cases per 100,000 persons within the last 14 days*

93.97

Percentage of RT-PCR tests that are positive during the last 14 days**

5.1%

Ability of the school to implement five key mitigation strategies

VDH does not have these data. CDC recommends self-assessment measuring a school's ability to implement consistent and correct use of masks, social distancing, hand hygiene and respiratory etiquette, cleaning and disinfection, and contact tracing in collaboration with the local health department.

Secondary Indicators, Chesapeake City or Eastern Region, 10/6/2020

Officials can use these secondary indicators to support the decision-making process in local communities. These secondary indicators should not be used as the main criteria for determining the risk of disease transmission in schools. They should be used to support decision-making derived from the core indicators.

Percent change in new cases per 100,000 population during the last seven days compared with the previous seven days†

1.8%

Percentage of hospital inpatient beds in the region that are occupied‡

70.5%

Percentage of hospital inpatient beds in the region that are occupied by patients with COVID-19‡

3.4%

Indicators for Dynamic School Decision Making

VDH Pandemic Metrics and Guidance for
K12 Mitigation Measures

CDC Indicators for Dynamic Decision-Making

INDICATORS	Lowest Risk of Transmission in Schools	Lower Risk of Transmission in Schools	Moderate Risk of Transmission in Schools	Higher Risk of Transmission in Schools	Highest Risk of Transmission in Schools
Number of new cases per 100,000 persons within the last 14 days*	<5	5 to <20	20 to <50	50 to ≤ 200	>200
Percentage of RT-PCR tests that are positive during the last 14 days**	<3%	3% to <5%	5% to <8%	8% to ≤ 10%	>10%
Ability of the school to implement 5 key mitigation strategies: <ul style="list-style-type: none"> Consistent and correct use of masks Social distancing to the largest extent possible Hand hygiene and respiratory etiquette Cleaning and disinfection Contact tracing in collaboration with local health department 	Implemented <u>all 5</u> strategies correctly and consistently	Implemented <u>all 5</u> strategies correctly but inconsistently	Implemented <u>3-4</u> strategies correctly and consistently	Implemented <u>1-2</u> strategies correctly and consistently	Implemented <u>no</u> strategies

*Number of new cases per 100,000 persons within the last 14 days is calculated by adding the number of new cases in the county (or other community type) in the last 14 days divided by the population in the county (or other community type) and multiplying by 100,000.

Secondary Indicators

- Percent change in new cases per 100,000 population during the last 7 days compared with the previous 7 days
- Percentage of hospital inpatient beds in the region that are occupied
- Percentage of hospital inpatient beds in the region that are occupied by patients with COVID-19
- Existence of localized community/public setting COVID-19 outbreaks

** These secondary indicators should not be used as the main criteria for determining the risk of disease transmission in schools. They are intended to support the decision making conversations.

Highlights from CDC Guidance

- Risk of transmission in schools is derived from a COMBINATION of disease transmission core indicators and self-assessment indicator
- The 5 “Key” Mitigation Strategies that should be self-assessed are:
 - Masks
 - Social distancing
 - Cleaning/disinfection
 - Hand hygiene/respiratory etiquette
 - Contact tracing in partnership with local HD
- CDC framework is intended to assist states/localities in making decisions. It is not dictating decisions.

Highlights from Virginia K12 Guidance

Tried to align the CDC categories to our Phase Guidance for Schools to the extent possible

Not intended to dictate decisions. It is intended to *guide* decisions.

Two mitigation guidance documents (will be posted to dashboard webpage):

- General Community Mitigation
- School Mitigation

CDC Transmission Risk in Schools	Virginia Mitigation Guidelines to Consider	Examples of actions to CONSIDER from the Phase Guidance
LOWEST	Phase 3 Guidance for Schools	<ul style="list-style-type: none"> Consider in-person instruction for all students while maintaining distancing Discourage very large gatherings Offer more extracurriculars
LOWER		
MODERATE	Phase 2 Guidance for Schools	<ul style="list-style-type: none"> Consider prioritizing specific learners for in-person instruction and remote instruction for others Restrict mixing of classes/groups Eliminate/limit extracurriculars
HIGHER		
HIGHEST	Phase 1 Guidance for Schools	<ul style="list-style-type: none"> Consider remote learning as primary method of instruction